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January 12, 2006

From: Estella Pineiro Patent Administrator 818-493-2251		
ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221		
Telecopier: 818/362-4795		
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PLEASE DELIVER TO EXAMINER S. GETZOW, Art Unit 3762. Thank you.

Ø 002

JAN 1 2 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Gene A. Bornzin

Confirmation No. 8723

Serial No.:

10/702,562

Examiner:

Scott M. Getzow

Filed:

11/05/2003

Art Unit:

3762

Docket No.:

A03P1072

For:

IMPLANTABLE CARDIAC DEFIBRILLATION ASSEMBLY

INCLUDING A SELF-EVALUATION SYSTEM AND METHOD

TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mall Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

X Response to Restriction Requirement

X Transmittal Letter, Fee and Cert. of Mailing

TEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE		\$ FEE
A	TOTAL CLAIMS FEE	18	20	0	X \$ 50	\$	0
В	INDEPENDENT CLAIMS FEE**	3	4	0	X \$200		0
С	MULTIPLE- DEPENDENT				X \$ 360		0
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160						0
E	ADDITIONAL FEES (i.e. Terminal Disclalmer, etc. Specify:	, Surcharge – Late Fee- Di)	edaration; Petitions; Infon	mation Disclosure Sta	tement;		
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D, and E)						0**

Charge Deposit Account No. 16-0068 the amount of

\$0**

A copy of this letter is enclosed.

PATENT

- <u>X_</u> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0068
 - Any additional filing fees required under 37 CFR 1.16.
 - Any patent application processing fees under 37 CFR 1.17.
- <u>X_</u> The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068
 - Any patent application processing fees under 37 CFR 1.17.
 - XX Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

1/12/06

Derrick Reed, Attorney for Applicants

Reg. No. 40,138

CUSTOMER NUMBER: 36802

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on:

January 12, 2006

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RESPONSE TO RESTRICTION REQUIREMENT

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on:

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In the Office Action, mailed January 5, 2006, the Examiner required restriction between two Inventions, namely Invention I corresponding to claims 1-12 and 14-18, and Invention II corresponding to claim 13. Applicant hereby elects Invention I, corresponding to claims 1-12 and 14-18. This election is made without traverse.

Please amend the application as follows.